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	(Depositor's name)
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<u>.</u>	(Date)

APPLICATION NO.	ATION NO. FILING DATE FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/811,968	03/30/2004	Koichiro Miura	119236	3000

TITLE OF INVENTION: POWER SUPPLY APPARATUS AND CONTROL CIRCUIT THEREFOR

, APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional	NO	\$1400		\$300	\$1700	06/07/2006		
EXAMINER		ART UNIT		CLASS-SUBCLASS				
STERRETT, JEFFREY L		2838		323-272000				
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  The Address form PTO/SB/122 attached.  The Address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  Assigned NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents an amember a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE								
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Authorized Signature	30 Xm			91 FC=15 Date 92 FC 115	915, 2006	1400.00 OP 300.00 OP		
Typed or printed name	Bogdan AcaZinch	<u>enko</u>		Registration N	o. <u>57<b>,</b>473</u>			

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